Amendments to the Specification:

Amend paragraph [0001] as follows:

[0001] This application claims the benefit of U.S. Provisional Application No. 60/552,279, filed March 10, 2004, ~~and is a continuation-in-part of U.S. Application No. 09/910,406, filed July 19, 2001, pending, which claims the benefit of U.S. Provisional Application No. 60/219,128, filed July 19, 2000. This application also claims the benefit of Japanese Application No. 317160 filed October 17, 2000, now pending. These priority documents are~~ incorporated herein by reference in ~~their~~ its entirety.

Amend paragraph [0087] as follows:

[0087] Thus, the invention contemplates, in another aspect, a method of ~~method of~~ reducing the blood level of IFN-γ in a subject by administering IFNτ to the subject in an amount effective to decrease the subject's IFN-γ blood level relative to the IFN-γ blood level in the absence of IFNτ administration. This method finds use particularly for patients taking an agent that causes an elevated IFN-γ level or for patients suffering from a condition that elevates their IFN-γ levels. Thus, the invention also contemplates a method of preventing an increase in the blood level of IFN-γ in a subject at risk of an elevated IFN-γ blood level due to (i) administration of a therapeutic agent or (ii) a disease condition, by administering IFNτ to the subject in an amount effective to decrease the subject's IFN-γ blood level relative to the IFN-γ blood level in the absence of IFNτ administration. As noted above, treatment of multiple sclerosis with IFNβ causes an increase level of IFNγ in patients. Co-administration (simultaneous or sequential administration) of IFNτ will assist in maintaining the IFNγ level at the level prior to treatment. Typically, the amount of IFNτ sufficient to produce such a decrease in subject's IFN-γ blood level is greater than about 5×10^8 U/day, more preferably 0.5×10^9 U/day or more, still more preferably 1×10^9 U/day or more.